

**EXHIBIT A**

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF TEXAS  
HOUSTON DIVISION

ROBERT MURPHY, on Behalf of Himself  
and Others Similarly Situated,

Plaintiffs,

v.

MULTI-SHOT, LLC,

Defendant.

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CASE NO. 4:14-CV-01464

COLLECTIVE ACTION

**IMPORTANT NOTICE TO \_\_\_\_\_ EMPLOYED BY DEFENDANT**

**To:   «First\_Name» «Last\_Name»**

**Re:   Your Right to Overtime Pay from Settlement with Defendant.**

**1.     Why Am I Getting this Notice?**

You are getting this Notice because a lawsuit against your current or former employer Multi-Shot, LLC (“Multi-Shot”) has settled. The lawsuit claimed Defendant did not pay overtime as required by state and/or federal law. You can receive money under the settlement if you fill out the attached Claim Form and return it to Plaintiff’s Counsel by **«Claim\_Filing\_Date»**.

**2.     How Do I Get the Money Offered to Me?**

You must fill out the attached Claim Form to receive money under the settlement. The Claim Form **must be returned to Plaintiff’s Counsel by U.S. Mail (postmark date), fax or E-Mail by «Claim\_Filing\_Date», if you want to receive money from the settlement.** If you do *not* want to accept the settlement, simply do nothing.

**3.     Your Share of the Settlement.**

By submitting the Claim Form, you will be entitled to a payment from the settlement. Your settlement payment was based on your employment history with Defendant, including the number of weeks you worked in the relevant period and your rate of pay. **Your settlement payment is estimated to be: \$«AMOUNT».**

**4.     What Happens If I Submit My Claim Form?**

«First\_Name» «Last\_Name»

If you return the Claim Form by «Claim\_Filing\_Date»:

- A. You will be acknowledging that you are represented by Bruckner Burch PLLC and Fibich, Leebron, Copeland, Briggs and Josephson, LLP and that you will be bound by the terms of the Professional Services Agreement signed by the Named Plaintiff in this case. You will not have to pay Bruckner Burch PLLC or Fibich, Leebron, Copeland, Briggs & Josephson, LLP any money directly. Defendant is paying attorneys' fees as part of the settlement.
- B. You will be waiving and releasing any and all claims for unpaid wages or overtime against Defendant during the period beginning three years back from the date you opt-in via the enclosed Claim Form and ending on the date you opt-in.
- C. You will receive your settlement payment.

**5. When Will I Receive My Money?**

The parties plan to ask the Court to authorize the distribution of payments within \_\_\_\_ days of «Claim\_Filing\_Date». If the Court rules within 2 weeks of the request, you should receive your check by [60 days after Claim Filing Date].

**6. What Does the Court Think?**

While the Court approved this settlement, the Court did not determine Defendant (or anyone else) did anything wrong. The Court did not determine you are owed any money. Instead, this is a settlement payment.

**7. What Does Defendant Think?**

Defendant believes the lawsuit is without merit and that you were paid correctly and fairly for your work. Defendant also does not believe a collective action is appropriate. Defendant nonetheless believes this settlement is a business solution to this dispute.

**8. What if I Have Other Questions?**

This Notice is only a summary. If you have additional questions, please call Bruckner Burch PLLC at **800-443-2441**. If you would like, you can obtain certain documents related to the case. However, the deadline for receiving your completed Claim Form will not be extended under any circumstances. **If your Claim Form is not postmarked, faxed and/or emailed by «Claim\_Filing\_Date», you will not receive money from this Settlement Agreement.**

**Please do not contact the Court regarding this Settlement. The Court must remain neutral in this matter and cannot offer you advice.**

**9. Where do I Send My Claim Form?**

Please return the Claim Form to:

«First\_Name» «Last\_Name»

Defendant Overtime Settlement  
c/o Bruckner Burch PLLC  
8 Greenway Plaza, Suite 1500  
Houston, Texas 77046

You may also return your Claim Form by Fax: 817-877-8065

Or by E-Mail: [frontdesk@brucknerburch.com](mailto:frontdesk@brucknerburch.com)